Department for Environmental Protection / Division of Waste Management / Solid Waste Branch
Quarterly Waste Quantity Report - DEP 7046-Q (Revised 2-05)

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WASTE ACTIVITY: CONTAINED LANDFILL

Facility Name:		Permit Number:			
County where landfill is located:	Agency Interest Number:				
Report for the Months of:		For the Year of:			
		Type of Waste			
Waste Source (County and State)	*Municipal Solid Waste (Tons Only)	*Industrial Waste (Tons Only)	*Special Waste (Tons Only)	as Alternate Daily Cover As Approved (Tons Only)	
Total for this page					
Grand Total of all pages					
*Grand Total of Municipal, Industrial and Special from all pages					
*Does not include waste used as Alternate Daily Cover. **Indicate the amount of waste used as Alternate Daily Cover. Please note this requires prior approval by the Cabinet.					
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for such violations.					
Signature:		Phone Number:			
Name - Please Print:		Date:			

This Certification clause shall be signed by the responsible person(s) described in 401 KAR 47:160, Section 6(1), and/or (2) and is required by 401 KAR 47:160, Section 6(4).